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Rockwell Collins

To: Mail Stop: Issue Fee From: Nathan O. Jensen

Location: US Patent Office Location: 124-323

Fax: 703-746-4000 Fax: 319-295-8777

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Pages: 3 (including Lead) Date: April 6, 2005

Applicant: Steven S. Seeley Serial No. 09/670,050 Filed: September 25, 2000

For: On-Board Entertainment Display Retractor Safety Device

Docket No. 99PS009/KE

Item: Issue Fee Transmittal in duplicate.

Thanks,

Nathan Jensen Reg. 41,460

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Sheila K. Matheys	(Depositor's mimo)
Quelos Matters	(Şignature)
4/6/05	(Date)

APPLIÇÂTIQN NO.	FILINO DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/670,050	09/25/2000	Steven S. Seeley	99PS009/K£	4085

TITLE OF INVENTION: ON-BOARD ENTERTAINMENT DISPLAY RETRACTOR SAFETY DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FI	38	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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CFR 1.363). Change of correspont Address form PTO/SB/I. Fee Address* indica PTO/SB/I. Number is required.	tion (or "Fee Address" Indict or more recent) attached. Use D RESIDENCE DATA TO B is an assignce is identified be a 37 CFR 3.11. Completion	Correspondence uion form of a Customer E PRINTED ON Tolow, no assignce of this form is NOT	(1) the ne or agents (2) the na registered 2 registered isted, no HE PATEN data will app	nting on the patent front page, li- tunes of up to 3 registered pater. OR, alternatively, and of a single firm (having as a lattomey or agent) and the name and patent attorneys or agents. If name will be printed. T (print or type) pear on the patent. If an assign of filing an assignment. CE: (CITY and STATE OR COI	a member a 2 Kyle Ep cs of up to no name is 3	
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Advance Order - # pl			The Dir Deposit Acc	ector is hereby authorized by a count Number 18-1722	harge the required fee(s), or (enclose an extra c	credit any overpayment, copy of this form).
a. Applicant claims S he Director of the USPTO	(from status indicated above MALL ENTITY status. See is requested to apply the Issu ublication Fee (if required) vords of the United States Park	37 CFR 1.27.	ion Fee (if a	cant is no longer claiming SMAI ny) or to re-apply any previousl to other than the applicant; a regi		
Authorized Signature	Nathan O. Jensen	Senser		Date	Co Apr 200	<u>)5 </u>

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transmitted to the USPTO (703) 746-4000, on the date indicated below. Rockwell Collins Inc. Intellectual Property department 400 Collins Road NE M S 124-323 Cedar Rapids, IA 52498 (Depositor's na Shejla K. Mathews lulas (Signature (Date 4/6/05 CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR APPLICATION NO. FILING DATE 4085 99P\$009/KE Steven S. Sceley 09/25/2000 09/670.050 TITLE OF INVENTION: ON-BOARD ENTERTAINMENT DISPLAY RETRACTOR SAFETY DEVICE DATE DUE TOTAL FEE(S) DUE PUBLICATION FEE ISSUE FEE SMALL ENTITY APPLN. TYPE 06/15/2005 \$1400 \$1400 NO nonprovisional CLASS-SUBCLASS ART UNIT EXAMINER 192-038000 3681 BONCK, RODNEY H Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 1 Nathan O. Jensen ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2 Kyle Eppela (2) the name of a single firm (having as a member a registered attention or agent) and the names of up to 2 registered patent attentions or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Cedar: Rapids. IA Rockwell Collins Piease check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖫 Corporation or other private group entity 🛄 Government 4a. The following fee(s) are enclosed: 4b. Payment of Foc(3): ■ A check in the amount of the fee(s) is enclosed. Issue Fee Payment by credit card. Form PTO-2038 is attached. Dublication Fee (No small entity discount permitted) The Director is hereby authorized by charge the required fee(s), or credit my overpayment, to Deposit Account Number 18-1722 (enclose an extra copy of this form). Advance Order - # of Copies Change in Entity Status (from status indicated above) ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27 The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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*2*005 AAA than <u>(2</u> ensen Authorized Signature

Typed or printed name Nathan O. Jensen

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